

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC | | FEC IDENTIFICATION NUMBER ▼ C C00530766 | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | | | |
|---|--------------------|--|--|--|---|
| Full Name of Payee Active Engagement | | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2020 | | |
| Mailing Address 113 East Market St Suite 300 | | | Amount 45000.00 | | |
| City Leesburg | State VA | Zip Code 20176 | Transaction ID : SE.22006 | | |
| Purpose of Expenditure Media Placement | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2020 | | |
| Name of Federal Candidate FLETCHER, ELIZABETH, , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate | | District: 07 State: TX |
| Calendar Year-To-Date Per Election for Office Sought | | 240897.10 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | |

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|--|--------------------|--|--|--|---|
| Full Name of Payee Tradewinds Consulting, Inc. | | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2020 | | |
| Mailing Address 21850 Inglewood Ct. | | | Amount 1275.26 | | |
| City Ashburn | State VA | Zip Code 20148 | Transaction ID : SE.22007 | | |
| Purpose of Expenditure Printing / Production / Postage | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2020 | | |
| Name of Federal Candidate HUNT, WESLEY, , | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate | | District: 07 State: TX |
| Calendar Year-To-Date Per Election for Office Sought | | 242172.36 | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | |

| | |
|--|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 46275.26 |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | |
| (c) TOTAL Independent Expenditures.....▶ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 13 / 2020

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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| PAGE | 2 | OF | 2 |
| FOR SE OF FORM 24/48 | | | |

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|---|--|--|--|
| NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC | | FEC IDENTIFICATION NUMBER ▼ C C00530766 | |
| Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report | | <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | |
|---|--------------------|---|---|
| Full Name of Payee Tradewinds Consulting, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2020 | |
| Mailing Address 21850 Inglewood Ct. | | Amount 1275.26 | |
| City Ashburn | State VA | Zip Code 20148 | Transaction ID : SE.22008 |
| Purpose of Expenditure Printing / Production / Postage | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2020 |
| Name of Federal Candidate FLETCHER, ELIZABETH, , | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 07 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX |
| Calendar Year-To-Date Per Election for Office Sought 243447.62 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------|---|--|
| Full Name of Payee | | Date of Public Distribution/Dissemination MM / DD / YYYY | |
| Mailing Address | | Amount | |
| City | State | Zip Code | Date of Disbursement or Obligation MM / DD / YYYY |
| Purpose of Expenditure | | Category/Type | |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 1275.26 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | 47550.52 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 13 / 2020

Signature